

**WEAKLEY COUNTY LOCAL GOVERNMENT  
HEALTH INSURANCE RATES  
EFFECTIVE JANUARY 1, 2013**

PLAN	PLAN TYPE	TOTAL PREMIUM	COUNTY SHARE	EMPLOYEE SHARE
<b>CIGNA - WEST</b>  PARTNERSHIP PPO	EMPLOYEE ONLY	\$ 580.77	\$ 435.57	\$ 145.20
	EMPLOYEE+CHILD(REN)	900.19	595.27	304.92
	EMPLOYEE+SPOUSE	1,248.63	769.51	479.12
	FAMILY	1,568.07	929.23	638.84
STANDARD PPO	EMPLOYEE ONLY	\$ 605.77	\$ 454.33	\$ 151.44
	EMPLOYEE+CHILD(REN)	925.19	614.03	311.16
	EMPLOYEE+SPOUSE	1,298.63	800.77	497.86
	FAMILY	1,618.07	960.47	657.60
LIMITED PPO	EMPLOYEE ONLY	\$ 371.90	\$ 278.92	\$ 92.98
	EMPLOYEE+CHILD(REN)	576.44	381.20	195.24
	EMPLOYEE+SPOUSE	799.58	492.76	306.82
	FAMILY	1,004.13	595.03	409.10
<b>BLUE CROSS BLUE SHIELD - WEST</b>				
PARTNERSHIP PPO	EMPLOYEE ONLY	\$ 600.77	\$ 450.59	\$ 150.18
	EMPLOYEE+CHILD(REN)	940.19	620.29	319.90
	EMPLOYEE+SPOUSE	1,288.63	794.51	494.12
	FAMILY	1,608.07	954.23	653.84
STANDARD PPO	EMPLOYEE ONLY	\$ 625.77	\$ 469.33	\$ 156.44
	EMPLOYEE+CHILD(REN)	965.19	639.03	326.16
	EMPLOYEE+SPOUSE	1,338.63	825.77	512.86
	FAMILY	1,658.07	985.49	672.58
LIMITED PPO	EMPLOYEE ONLY	\$ 391.90	\$ 293.92	\$ 97.98
	EMPLOYEE+CHILD(REN)	616.44	406.20	210.24
	EMPLOYEE+SPOUSE	839.58	517.76	321.82
	FAMILY	1,044.13	620.05	424.08

**WEAKLEY COUNTY PAYS 75% OF THE TOTAL PREMIUM OF THE EMPLOYEE ONLY COST PLUS 50% OF THE ADDITIONAL COST FOR DEPENDENTS. WEAKLEY COUNTY IS PREMIUM LEVEL 1.**

<b>DENTAL INSURANCE RATES EFFECTIVE 1/01/2013</b>			
<b><u>ASSURANT PRE-PAID</u></b>		<b><u>DELTA DENTAL PPO</u></b>	
EMPLOYEE ONLY	\$9.63	EMPLOYEE ONLY	\$20.46
EMPLOYEE + CHILD(REN)	\$20.00	EMPLOYEE + CHILD(REN)	\$47.03
EMPLOYEE + SPOUSE	\$17.07	EMPLOYEE + SPOUSE	\$38.69
FAMILY	\$23.47	FAMILY	\$75.71

<b>VISION INSURANCE RATES EFFECTIVE 1/01/2013</b>			
<b><u>BASIC PLAN</u></b>		<b><u>EXPANDED PLAN</u></b>	
EMPLOYEE ONLY	\$3.27	EMPLOYEE ONLY	\$5.73
EMPLOYEE + CHILD(REN)	\$6.54	EMPLOYEE + CHILD(REN)	\$11.46
EMPLOYEE + SPOUSE	\$6.21	EMPLOYEE + SPOUSE	\$10.89
FAMILY	\$9.61	FAMILY	\$16.84

**WEAKLEY COUNTY LOCAL GOVERNMENT**  
**LATE APPLICANT**  
**HEALTH INSURANCE RATES**  
**EFFECTIVE JANUARY 1, 2013**

PLAN	PLAN TYPE	TOTAL PREMIUM	COUNTY SHARE	LATE APPLICANT FEE	EMPLOYEE SHARE
<b>CIGNA - WEST PARTNERSHIP PPO</b>	EMPLOYEE ONLY	\$ 580.77	\$ 424.94	\$ 68.00	\$ 223.83
	EMPLOYEE+CHILD(REN)	900.19	580.77	68.00	387.42
	EMPLOYEE+SPOUSE	1,248.63	750.74	145.00	642.89
	FAMILY	1,568.07	906.56	145.00	806.51
<b>STANDARD PPO</b>	EMPLOYEE ONLY	\$ 605.77	\$ 445.12	\$ 68.00	\$ 228.65
	EMPLOYEE+CHILD(REN)	625.19	600.93	68.00	92.26
	EMPLOYEE+SPOUSE	1,298.63	784.36	145.00	659.27
	FAMILY	1,618.07	940.20	145.00	822.87
<b>LIMITED PPO</b>	EMPLOYEE ONLY	\$ 371.90	\$ 272.11	\$ 68.00	\$ 167.79
	EMPLOYEE+CHILD(REN)	576.44	371.90	68.00	272.54
	EMPLOYEE+SPOUSE	799.58	480.74	145.00	463.84
	FAMILY	1,004.13	580.52	145.00	568.61
<b>BLUE CROSS BLUE SHIELD - WEST PARTNERSHIP PPO</b>	EMPLOYEE ONLY	\$ 600.77	\$ 432.46	\$ 68.00	\$ 236.31
	EMPLOYEE+CHILD(REN)	640.19	593.27	68.00	114.92
	EMPLOYEE+SPOUSE	1,288.63	763.24	145.00	670.39
	FAMILY	1,608.07	919.06	145.00	834.01
<b>STANDARD PPO</b>	EMPLOYEE ONLY	\$ 625.77	\$ 452.64	\$ 68.00	\$ 241.13
	EMPLOYEE+CHILD(REN)	965.19	613.43	68.00	419.76
	EMPLOYEE+SPOUSE	1,338.63	796.86	145.00	686.77
	FAMILY	1,658.07	952.68	145.00	850.39
<b>LIMITED PPO</b>	EMPLOYEE ONLY	\$ 391.90	\$ 279.61	\$ 68.00	\$ 180.29
	EMPLOYEE+CHILD(REN)	616.44	384.40	68.00	300.04
	EMPLOYEE+SPOUSE	839.58	493.24	145.00	491.34
	FAMILY	1,044.13	593.04	145.00	596.09

**WEAKLEY COUNTY PAYS 75% OF THE TOTAL PREMIUM OF THE EMPLOYEE ONLY COST PLUS 50% OF THE ADDITIONAL COST FOR DEPENDENTS.**

**WEAKLEY COUNTY IS PREMIUM LEVEL 1.**